

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

				File v	with: City or Town C	lerk or Elect	tion Commissio
Fill in Reporting Period dates:	Beginning Date:	Jan 1,	2016	Ending Date:	: Dec 31, 201	16	
Type of Report: (Check one)		-					
8th day preceding preliminary	8th day preceding elec	etion [30 day afte	er election 🔀	year-end report	dis	ssolution
Michael P. Kushmerek			Committee	to Elect Michael	P. Kushmerek		
Candidate Full Nam	e (if applicable)			Co	ommittee Name		
Fitchburg Ward 4 City Council			Gregory W.	Wheeler			
Office Sought a	and District			Name of	Committee Treasure	r	
339 Blossom Street, Fitchburg, MA ()1420		3 Park Stre	et, 2nd Floor, Led	ominster, MA 014	ł53	
Residential A	Address		-	Commit	ttee Mailing Address		
Telephone Number (optional):			Telephone Nur	nber (optional):			
	SUMMARY BAI	LANCE	INFORM	ATION:			
Line 1: Ending Ba	lance from previous repo	rt '			1,737	'.01	
Line 2: Total recei	pts this period (page 3, li	ne 11)		·		0	
Line 3: Subtotal (li	ne 1 plus line 2)				1,737	.01	
Line 4: Total expen	nditures this period (page	5, line	14)			265	
Line 5: Ending Bal	lance (line 3 minus line 4	.)		-	1,472	.01	
Line 6: Total in-kin	nd contributions this peri	od (page	e 6)			o,	
Line 7: Total (all)	outstanding liabilities (pa	ige 7)			<u> </u>	<u> </u>	
Line 8: Name of ba	ank(s) used: Worker's Cred	dit Union		N ₁			
Affidavit of Committee Treasurer: I certify that I have examined this report includi activity, including all contributions, loans, recei finance activity of all persons acting under the a	pts, expenditures, disbursements, i	in-ki <u>nd eo</u> r	tributions and lia	bilities for this repor	ting period and repres G.L. c. 55.	sents the can	npaign
Signed under the penalties of perjury:				(Treasurer's signat	ture) Date:	Jan 16, 2	017
Candidate with Committee and no active I certify that I have examined this report in activity, of all persons acting under the authincurred any liabilities nor made any expensions.	ity independent of the committee cluding attached schedules and it i hority or on behalf of this committ ditures on my behalf during this re	e is, to the be tee in accor eporting pe	st of my knowled dance with the re- riod.	age and belief, a true	and complete statement. c. 55. I have not re	ent of all can	npaign finance contributions,
Candidate without Committee OR Cand I certify that I have examined this report in finance activity, including contributions, lo campaign finance activity of all persons act	cluding attached schedules and it i ans, receipts, expenditures, disbur	s, to the be sements, in	st of my knowled kind contribution	ns and liabilities for	this reporting period	and represen	npaign its the
Signed under the penalties of perjury:				(Candidate's signa	ture) Date:	Jan 16, 20	017

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received Name and Residential Address (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
			(*************************************
	:		
9: Total Receipts	over \$50 (or listed above)		
10: Total Receipt	s \$50 and under* (not listed above)		
	CEIPTS IN THE PERIOD		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Am		Occupation & Employer (for contributions of \$200 or more)
ne 9: Total Receipts over	er \$50 (or listed above)		
	0 and under* (not listed above)		
ne 11: TOTAL RECEI	PTS IN THE PERIOD		← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and

Date Paid	To Whom Paid (alphabetical listing)	Mittee name and a page number of	Purpose of Expenditure	Amount
Jan 27, 2016	Committee to Elect Stephen DiNatale	30 Lyman Avenue, Fitchburg, MA 01420	Fee for attendance of inaugural ball	Amount
Jan 28, 2016	People for American Way	1101 15th Street, NW Suite 600, Washington, DC 20005	Membership fee for young elected officials network	
		Line 12: Total Expenditures over	\$50 (or listed above)	265
		Line 13: Total Expenditures \$50 a	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PERIOD	265

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	
	(-1	Address	rurpose of Expenditure	Amount
		-		
			.	
		Line 12. From 14.		
		Line 12: Expenditures over \$50 (o	r listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
•	Enter on page 1 line 4 ->	Line 14: TOTAL EXPENDITUR	ES IN THE DEDICE	
you have itemized	l avnonditures of \$50 1	include them in line 12. I ine 13 shoul	d include only those eyear literature	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
		Line 15: In-Kind Contributions over \$50 (or listed above)			
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 →	5 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			,	
				4
				-
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	